

# Important information for **medical care** professionals.







# Periodontal disease and preterm, low-birthweight infants.

Recent studies indicate a link between periodontal disease and adverse pregnancy outcomes. These outcomes include preterm delivery, low birthweight, and preeclampsia.

Periodontal disease is the most common chronic, infectious disorder afflicting humankind. Periodontal disease can manifest as:

- Gingivitis, which is characterized by inflammation of the gums and is reversible with brushing, flossing, and professional cleaning.
- Periodontitis, which is an infection of soft tissues, cementum, and bone and is irreversible without periodontal therapy.

Women with periodontal disease may have a threefold to sevenfold increase in preterm, low-birthweight infants.\*

Oral disease may be responsible for as many as 18% of the 250,000 preterm, low-birthweight infants born in the United States each year, according to the National Institutes of Health. That's a significant number when you consider that low birthweight remains the leading cause of death for infants during the first year of life.

# Preterm birth is a problem that should be addressed.

In Idaho 10.6% of births are preterm and 6.5% are low birthweight, which creates considerable physical and emotional suffering for infants and their parents. (Idaho Bureau of Vital Statistics and Health Policy 2005)

## There is a fiscal toll, as well.

In 2004 Idaho Medicaid paid more than \$17 million in medical care for low-birthweight babies during their first year of life — 10 times more than the medical costs for a normal infant over the same period.

### Educate your patients.

Women who are considering pregnancy or women who are pregnant should be told about the relationship between good oral health, birth outcomes, and the long-term health of their infant. Because the majority of women seek out some form of prenatal care over the course of their pregnancy, it is a good opportunity for you to expand the health discussion to include an emphasis on routine dental care and to recommend a dental checkup.

# In order to make better health decisions, patients need to:

- Understand the problem.
- 2 Know what they must do.
- Know why it is important for them to do it.

If you have questions, consult with a dental health professional.

With your help, we can increase awareness about the importance of dental care during pregnancy and reduce the number of preterm, low-birthweight babies born in Idaho.

### **Additional Resources:**

American Dental Association — www.ada.org/prof/resources/topics/gum.asp
American Academy of Periodontology — www.perio.org
Children's Dental Health Project — www.cdhp.org/Projects/ProfessionalLiterature.asp

\*(Xiong X, Buekens P, Fraser WD, Beck J, Offenbacher S. Periodontal disease and adverse pregnancy outcomes: a systematic review. BJOG 2006; 113;135-143.)





# **Important** information for dental health professionals.







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Clinical trials suggest oral prophylaxis and periodontal treatment can lead to as much as a 57% reduction in preterm, low-birthweight infants and a 50% reduction in preterm births.\*

# Preterm birth is a problem that should be addressed.

In Idaho 10.6% of births are preterm • Take prenatal vitamins. and 6.5% are low birthweight (Idaho Bureau of Vital Statistics and Health Policy, 2005).

# The challenges:

The 2004 Idaho Pregnancy Risk Assessment Trackina System (PRATS) reported that 61% of Idaho mothers did not receive dental care during pregnancy. In fact, 59% reported that their prenatal health care provider did not tell them about the importance of getting regular dental care during pregnancy.

# What patients need to know:

Women who are considering pregnancy or women who are pregnant should be told about the relationship between good oral health, birth outcomes, and the long-term health of their infant.

It is recommended that health information be delivered in the following format:

- What is the problem?
- What does the patient need to do?
- Why is it important for the patient to do this?

Emphasize daily dental care, as well as sound health practices:

- Brush and floss daily.
- Use fluoride toothpaste.
- Make good food choices.
- Don't smoke, and avoid exposure to secondhand smoke.
- Limit sweet drinks and snack foods.

# **Guidelines for dental** treatment during pregnancy:

- Preventative dental care is safe throughout pregnancy.
- Radiographs can be used when necessary.
- Periodontal treatment is best done during the second trimester.
- Non-urgent restorative care should be done during the second trimester.
- Emergency dental treatment can be performed at any time.
- Anesthesia and sedation should be limited to the use of local anesthesia.
- If there are questions, consult with the patient's physician.

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